## U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:		Case Number:					
An appearance is her	eby filed by the undersi	igned as a	atto	rney for	:		
Attorney name (type	or print):						
Firm:							
Street address:							
City/State/Zip:							
Bar ID Number: Telephone N (See item 3 in instructions)			Number	:			
Email Address:							
Are you acting as lead	d counsel in this case?				Yes	No	
Are you acting as local counsel in this case?					Yes	No	
Are you a member of the court's trial bar?					Yes	No	
If this case reaches trial, will you act as the trial attorney?				,	Yes	No	
If this is a criminal cas		Retained Counsel					
		Appointed Counsel If appointed counsel, are you					
			а	• •	l Defende		
		CJA Panel Attorney					
general bar or be granted I declare under penalty of	this Court an attorney must eleave to appear pro hac vice perjury that the foregoing is as the same force and effect	e as provide true and co	ed fo	or by local ct. Under 2	l rules 83.1 28 U.S.C.§	2 through 8 1746, this	
Executed on							
Attorney signature:	S/(Use electronic signature i	if the appea	ran	ce form is	filed elect	ronically.)	